UNITED STATES PATENT & TRADEMAPK OFFICE Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND			
1 Date of Request: 8-9-05 2 Serial/Patent # 522725			
3 Please refund the following fee(s):	4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
Filing	/	2/1/05	\$ 100
Amendment			\$
Extension of Time			\$
Notice of Appeal/Appeal	\$		\$
Petition			\$
Issue			\$
Cert of Correction/Terminal Disc.			\$
Maintenance			\$
Assignment			\$
Other			\$
	7 TOTAL AMOUNT S OO 8 TO BE REFUNDED BY:		
10 REASON:	Treasury Check		
Overpayment	Credit Deposit A/C #:		
Duplicate Payment	9 [41140		
No Fee Due (Explanation):			
		<u></u>	
11 REFUND REQUESTED BY:			
TYPED/PRINTED NAME:	TITLE:		
SIGNATURE:PHONE:			
OFFICE:			
THIS SPACE RESERVED FOR FINANCE USE ONLY:			
APPROVED:	DATE:		

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

PORM PTO 1577 (01/90)

Office of Finance Refund Branch Crystal Park One, Room 802B